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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/540,690			ing Date 11/2006	To be Mailed	
_	Al	PPLICATION	AS FILE	OTHER THAN SMALL ENTITY OR SMALL ENTITY									
	FOR	,	NUMBER FILED		NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A			N/A			N/A		
	SEARCH FEE (37 CFR 1.16(k), (i),	or (m))	N/A		N/A			N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•			x \$ =		OR	x \$ =		
INDEPENDENT CLAIMS (37 CFR 1.16(h))			minus 3 =		•			x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 add	If the specification and dr sheets of paper, the appli is \$250 (\$125 for small er additional 50 sheets or fra 35 U.S.C. 41(a)(1)(G) and			n size fee due for each n thereof. See							
	MULTIPLE DEPEN	IDENT CLAIM P	7 CFR 1.16(j										
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL]	TOTAL		
APPLICATION AS AMENDED – PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT	11/30/2009	REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)	·	RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16(i))	• 30	Minus	·· 42		= 0		x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 3	Minus	***3		= 0		x \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		-	
				-				TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
(c, 5, 10 (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST													
AMENDMENT	ANE	REMAINING AFTER AMENDMENT		NUMBI PREVIOL PAID F	ĒR JSLY	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(i))	· 30	Minus	- 42	-	=		x \$ =		OR	x \$ =		
	Independent (37 CFR 1.16(h))	· 3	Minus	··· 3		=		x \$ =		OR	x \$ =		
	Application Size Fee (37 CFR 1.16(s))												
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR			
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If *** II	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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